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PTO/SB/30 (09-08) Approved for use through 03/31/2007, OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paparwork Reduction Act of 1895, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Request Application Number for Filing Date Continued Examination (RCE) First Named Inventor Transmittal Address to: Art Unit Mail Stop RCE Commissioner for Patents Examiner Name P.O. Box 1450 Alexandria, VA 22313-1450 Attorney Docket Number This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2. Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s). Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked. Consider the arguments in the Appeal Brief or Reply Brief previously filed on Enclosed Amendment/Reply Information Disclosure Statement (IDS) Affidavit(s)/ Declaration(s) ii. Miscellaneous Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required) The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. Fees 3. The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No. ______ I have enclosed a duplicate copy of this sheet. . I have enclosed a duplicate copy of this sheet. RCE fee required under 37 CFR 1.17(e) ij. Extension of time fee (37 CFR 1.136 and 1.17) Other Check in the amount of \$ _ Payment by credit card (Form PTO-2038 enclosed) Ç. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED Signature Name (Print/Type) Registration No. CERTIFICATE OF MAILING OR TRANSMISSION I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissional to Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Potent and Trademark Office on the date showned process. Name (Print/Type) Date 1020 CG

This collection of Information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO Name (Print/Type) This collection of information is required by 37 CPR 1.714. The information is required to consider a consider of information is estimated to take 12 minutes to complete, to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CPR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2. 11/01/2006 CKHLOK 00000010 190033 10685872 395.00 DA